

STATE OF NEVADA
 DIVISION OF WATER RESOURCES
WELL DRILLER'S REPORT

OFFICE USE ONLY
 Log No. 92217
 Perm. No. _____
 Basin 87

PRINT OR TYPE ONLY
 DO NOT WRITE ON BACK

Please complete this form in its entirety in accordance with NRS 534.170 and NAC 534.300

NOTICE OF INTENT NO. **54489**

1. OWNER **Jeff Wooldridge**
 MAILING ADDRESS **15777 Fawn Ln.**
Reno, NV 89511

ADDRESS AT WELL LOCATION **15777 Fawn Ln.**

2. LOCATION **SW** 1/4 **SW** 1/4 Sec. **36** T **18N**
 PERMIT NO. _____
 Issued by Water Resources **150-241-02**
 Parcel No. _____

N/S R **19E** E **Washoe** County
 Subdivision Name _____

3. WORK PERFORMED
 New Well
 Deepen
 Replace
 Abandon
 Recondition
 Other _____

4. PROPOSED USE
 Domestic
 Municipal/Industrial
 Irrigation
 Monitor
 Test
 Stock

5. WELL TYPE
 Cable
 Air
 Rotary
 RVC
 Other **mud**

6. LITHOLOGIC LOG

Material	Water Strata	From	To	Thickness
Coarse sand layers				
brown clay		170	190	20
Rock fractured granite	x	190	235	45
Hard granite some soft layers sand	x	235	315	80
Granite hard		315	435	120
Fractured granite	x	435	470	35

Washoe county well permit # WL 040031

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8. WELL CONSTRUCTION

Depth Drilled **470** Feet Depth Cased **470** Feet

HOLE DIAMETER (BIT SIZE)

From	To
6.125 Inches	170 Feet
Inches	Feet
Inches	Feet

CASING SCHEDULE

Size O.D. (Inches)	Weight/Ft. (Pounds)	Wall Thickness (Inches)	From (Feet)	To (Feet)
5	10.79	.188	169	470

Perforations:

Type perforation **Machine cut**
 Size perforation **3/32 x 3**

From	250 feet to	270 feet
From	410 feet to	430 feet
From	450 feet to	470 feet
From	feet to	feet
From	feet to	feet

Surface Seal: Yes No
 Depth of Seal _____
 Placement Method: Pumped Poured
 Seal Type: Neat Cement Cement Grout Concrete Grout
 Gravel Packed: Yes No
 From _____ feet to _____ feet

9. WATER LEVEL

Static water level **123** feet below land surface
 Artesian flow _____ G.P.M. _____ P.S.I.
 Water temperature **Cool** °F Quality **Not tested**

10. DRILLER'S CERTIFICATION

This well was drilled under my supervision and the report is true to the best of my knowledge.

Name **Bruce MacKay Pump & Well Service, Inc.**
 Contractor

Address **1600 Mt. Rose Hwy**
 Contractor

Reno, NV 89511
 Nevada contractor's license number issued by the State Contractor's Board **23096**

Nevada driller's license number issued by the Division of Water Resources, the on-site driller **1719**

Signed *R. Bruce MacKay*
 By driller performing actual drilling on-site or contractor

Date **2/27/04**

7. WELL TEST DATA

TEST METHOD:	G.P.M.	Draw Down (Feet Below Static)	Time (Hours)
<input type="checkbox"/> Bailer <input type="checkbox"/> Pump <input checked="" type="checkbox"/> Air Lift	50+		3